The CHW Model & Accountable Care Structures

Primary Care Symposium:
Enhancing Care With Community Health Workers
September 5, 2013

Odilia Garcia
Program Coordinator
MHP, Promoviendo Vidas Saludables

MHP

Our Mission

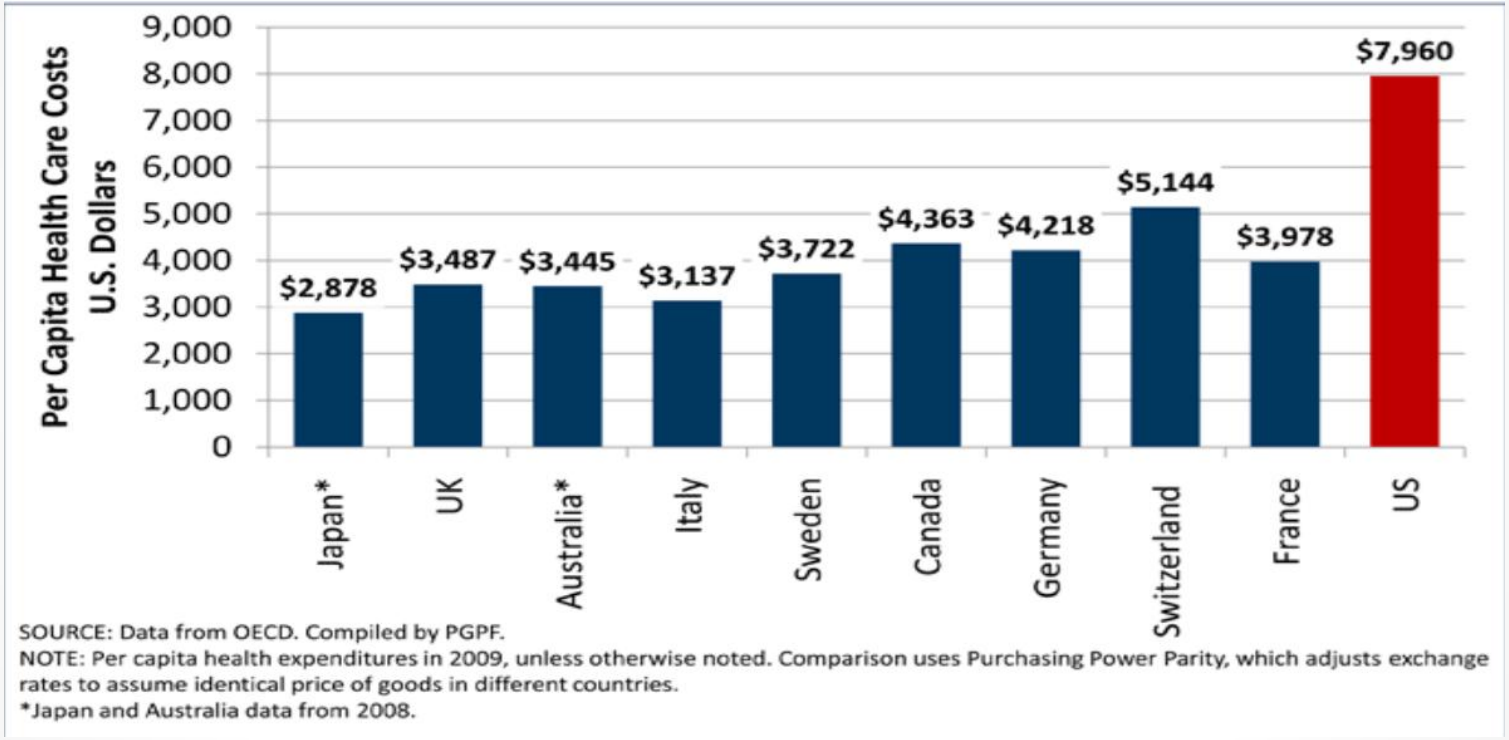
MHP provides culturally-appropriate health education, outreach and sustainable community development to farmworker, migrant, border, and/or other underserved or isolated communities throughout the nation. Through increased knowledge and skill building, individuals and families are empowered to live healthy lives.

CHW Training and Technical Assistance Program

- Federally Funded Program
- Provide Training and Technical Assistance nationally to community-based organizations, health departments and community stakeholders
- Assist in the planning, implementation and evaluation of CHW programs
- Train CHWs
- Improve access to care for ethnic minority populations

Staggering Statistics in Healthcare

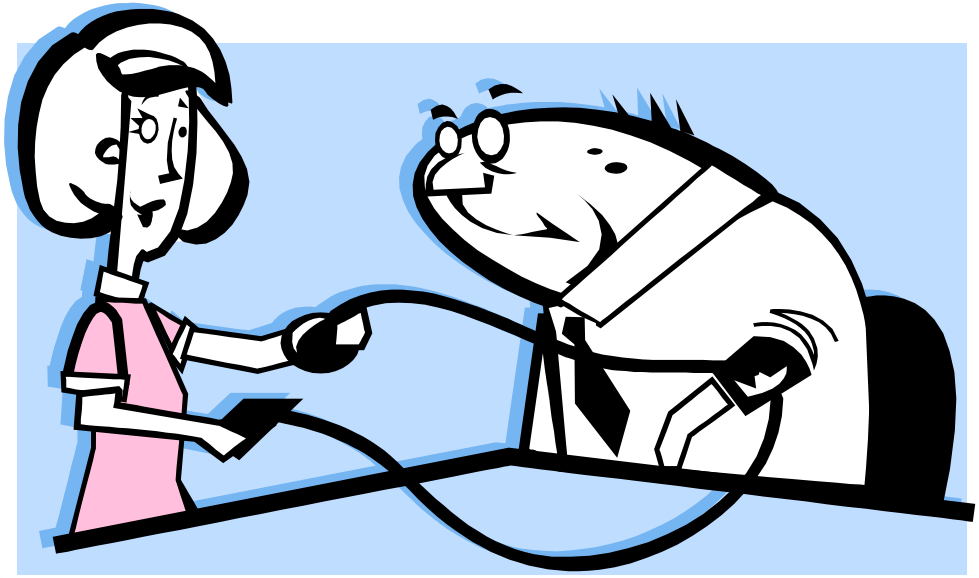
We are spending more and getting fewer results than other countries.



SOURCE: Data from OECD. Compiled by PGPF.
NOTE: Per capita health expenditures in 2009, unless otherwise noted. Comparison uses Purchasing Power Parity, which adjusts exchange rates to assume identical price of goods in different countries.
*Japan and Australia data from 2008.

What is an ACO?

- **A new care delivery model**
- **New way to pay healthcare providers**



What is an ACO?

A group of health care providers who give coordinated care, chronic disease management and thereby improve the quality of care patients receive. The organization's payment is tied to achieving health care quality goals and outcomes that result in cost savings.

What is an ACO?

	Accountable Care Organizations
Key Players	Hospitals, physician group practices, networks of individual practices, and partnerships between hospitals and other health care professionals
Delivery Structure	Multiple providers; complete and timely information about patients and services they are receiving; resources & support for patient education and self-management support; coordinated relationships of PCP with specialists
Required Resources	Technology and skills for population management and coordination of care
Accountability	Joint accountability for care by all providers involved
Payment Structure	Traditional fee-for-service, supplemented by annual shared savings for participating ACOs that meet specified quality performance

Role of CHWs

- They provide leadership, peer education, support, and resources to support community empowerment.
- As members of minority and underserved populations they are in a unique position to build on strengths and to address unmet health needs and disparities in their communities.
- They integrate information about health and the health care system into the community's culture, language and values system, thus reducing many of the barriers to health services.

CHWs Produce Results

- **Culturally competent -** successfully addressing cultural differences that inhibit access to health care and information.
- **Accessible -** living and working with the people they serve.
- **Expert -** knowing intimately the strengths and challenges of their community and which strategies will work best.
- **Sustainable -** serving as a resource to their communities over a long period of time.

The CHW Model & ACA

- Section 5101: Promotores(as)/CHWs defined as “primary care professionals.”
- Section 5313: Authorizes CDC grants to promote the community health workforce, “…to promote positive health behaviors and outcomes for populations in medically underserved communities through the use of community health workers.”

New Delivery Approach

- Patient-Centered Care
  - Appointments when needed
  - Support when needed (e.g. transitions between health care settings)
  - Coordination between patients and providers
  - Health Information Technology

Health Care Delivery System

Current System

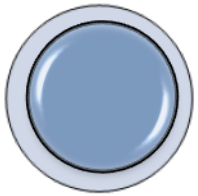
Fragmentation

Focus on "doing"

One-to-one care

Misaligned financial incentives

Focus on volume/intensity



ACO System

Integration

Cooperation

Focus on managing a population

Team-based care

Aligned incentives

Focus on quality and efficiency

A New Way to Pay Providers

Traditional

- In the traditional payment system, providers are paid more if patients have more procedures and tests.

ACO

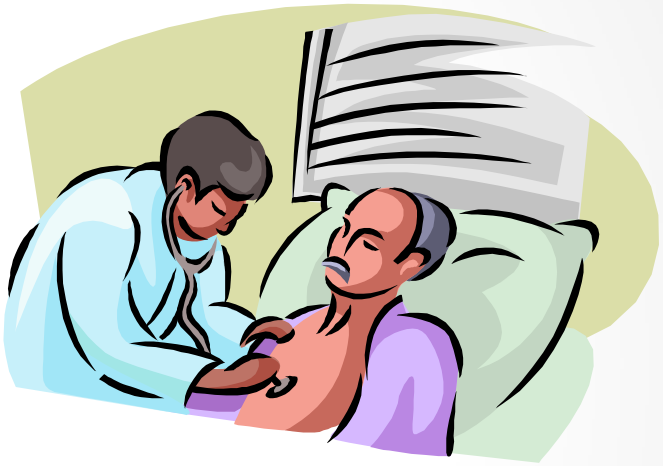
- In an ACO, if patients' health care costs go down but health care quality stays the same, the ACO gets to keep a part of those savings.
  - ➢ Creates a financial incentive to keep patients healthy.
  - ➢ Creates a decrease in hospital and urgent care admission/re-admission.

ACO Quality Measures

- Improve Care For Individuals

  Patient Experience

  Care Coordination



- Improve Care For Populations

  Preventive Health

  Chronic Population Management

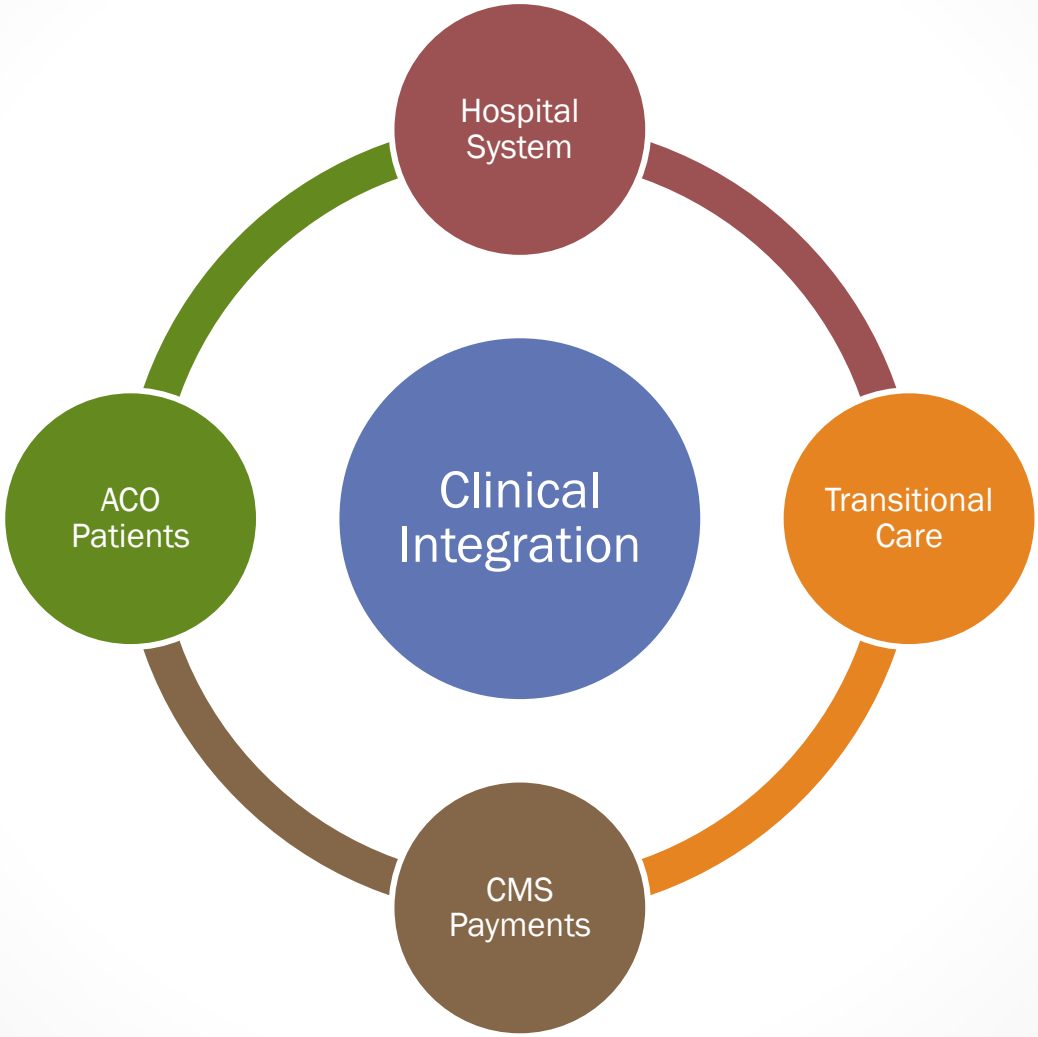
Example: Medical Home

A Patient Centered Experience

PCMH

	Patient Centered Medical Home
Key Players	Primary care practice teams, including medical specialists, nurses, pharmacists, nutritionists, dieticians, social workers, health educators/health system navigators, behavioral and mental health providers, doctors of chiropractic medicine, licensed complementary and alternative medicine practitioners, and physician assistants
Delivery Structure	Focus on patient-physician relationship (single practice); physician-led practice; enhanced access to care; coordinated and integrated care; comprehensive, continuous care
Required Resources	Resources to provide 24-hour care management and support during transitions in care, including on-site visits, discharge plans, counseling, medication management, referrals for behavioral health as needed; serve as liaison to community prevention and treatment programs
Accountability	Rests primarily with the primary care practice
Payment Structure	Grants or contracts from HHS to interdisciplinary, interprofessional teams

Healthcare Integration

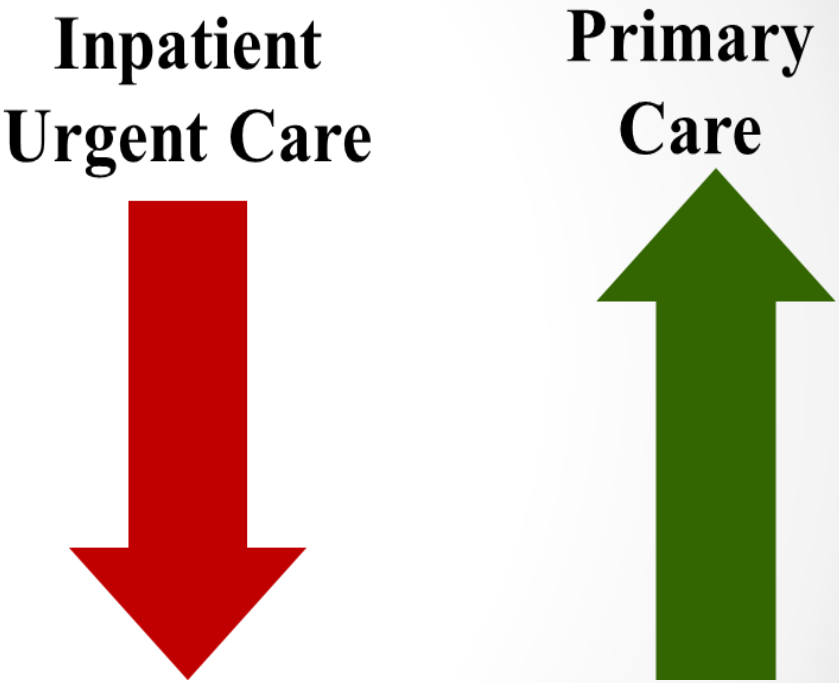


Case Study

Cost Savings & ROI Example

Denver Health System

- N= 590
- Outreach by Promotores(as)
- They Decreased:
  - Total charges by $300,000.
  - Uncompensated charges by $206,485.
    - **$95,941 in Savings Annually**
    - **ROI = 2.28:1**



Source: Whitley E., et al. *Journal of Health Care for the Poor and Underserved,17(1),* 2007, 6-15.

ACOs & The CHW Model

- Greater need and opportunity for involvement of Promotores(as)/CHWs in health care settings.
- Continuity of care.
- Ensures trust between patients and providers/facilities.
- Help patients navigate a new health care system.
- Provides culturally competent health care delivery.
- Decreases language barriers.
- Provides appropriate health literacy to patients.
- Motivates patient/doctor communication.
- Increases patient compliance for a healthier lifestyle
- Reduces healthcare costs and creates cost savings at multiple levels.

Health Reform Priority Areas

- Increasing Access to Health Insurance
- Improving Affordability of Health Insurance
- Expanding the Public Health Workforce
- **Improving Healthcare Quality**
- **Lowering Healthcare Expenditures**
- **Reducing Health Disparities**
- **Emphasizing Wellness and Prevention**

Current Initiatives

ACA Programs

- Medicaid Expansion
- Patient Navigator Programs
- Hospital Readmission Reduction Program
- Grants to Promote the Community Health Workforce
- Integrating CHWs into State Health Plans
- CMS Healthcare Innovation Awards

Challenges and Recommendations

Challenges

•CHW roles must be clearly defined
•Large organization's can't adopt innovations quickly.
•Some organizations lack capacity to support CHW programs
•CHWs must keep their essence as members of the community.

Recommendations

- Engage legislators and health departments
- CHW Training Protocols
- Strong Evaluation Measures needed
- Program Monitoring and outcome tracking

Resources

1. **The Roles of Patient-Centered Medical Homes And Accountable Care Organizations in Coordinating Patient Care**
Agency for Healthcare Research and Quality U.S. Department of Health and Human Services, Dec 2010

2. Patient-Centered Medical Home: Research Synthesis Report
American Hospital Association Committee on Research, Sept 2010

3. Opportunities For Peer Support in the Affordable Care Act
Peers For Progress , Mar 2013

4. Medicaid Health Homes for Beneficiaries with Chronic Conditions
Kaiser Family Foundation, Aug 2013

5. Accountable Care Organizations and You: How ACOs Affect Your Practice
American Academy of Family Physicians, 2013

6. Defining The Medical Home
Patient-Centered Primary Care Collaborative, 2013